



## Organic Certifying Agent Registration Application

Registration Year Ending: \_\_\_\_\_ Status: ☐ New ☐ Renewal ☐ No Longer Needed

If Renewal, Registration No. of Establishment: \_\_\_\_\_

### Business Information

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

County: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Phone: (\_\_\_\_) \_\_\_\_\_ Business Fax: (\_\_\_\_) \_\_\_\_\_

Business Email: \_\_\_\_\_

Mailing address if different from above: Street or P.O. Box: \_\_\_\_\_

**Blank Space**  
For Official Use Only

City: \_\_\_\_\_ State: \_\_\_\_\_ County: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Title: \_\_\_\_\_

Federal/Tax ID #

Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Assumed Name (DBA): \_\_\_\_\_ **If applicable, please attach a copy of DBA certificate.**

### Certifying Agent Information

Are you accredited by USDA as a certifying agent? ☐ Yes ☐ No

Do you require training for your inspectors for your agency? ☐ Yes ☐ No

(If yes, please describe your training requirements): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Registration Fees

AOBJ: 0313

**\$200.00 per company**

Payment Method: Check/Money Order no. \_\_\_\_\_ Amount enclosed: \_\_\_\_\_

**Please make check/money order payable to the State of Michigan and submit to the address at the top of the page.**

I hereby certify that the statements given above are true and correct to the best of my knowledge.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please print your name here: \_\_\_\_\_

Title: \_\_\_\_\_

Application continues  
on the back of this form

## Certified Organic Persons/ Agricultural Products

Please list all persons and agricultural products, certified by the agent.

Name: \_\_\_\_\_ Ph: (\_\_\_\_) \_\_\_\_\_ Date Certified: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip.: \_\_\_\_\_

Agricultural Products: \_\_\_\_\_

Name: \_\_\_\_\_ Ph: (\_\_\_\_) \_\_\_\_\_ Date Certified: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip.: \_\_\_\_\_

Agricultural Products: \_\_\_\_\_

Name: \_\_\_\_\_ Ph: (\_\_\_\_) \_\_\_\_\_ Date Certified: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip.: \_\_\_\_\_

Agricultural Products: \_\_\_\_\_

Name: \_\_\_\_\_ Ph: (\_\_\_\_) \_\_\_\_\_ Date Certified: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip.: \_\_\_\_\_

Agricultural Products: \_\_\_\_\_

Name: \_\_\_\_\_ Ph: (\_\_\_\_) \_\_\_\_\_ Date Certified: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip.: \_\_\_\_\_

Agricultural Products: \_\_\_\_\_

Name: \_\_\_\_\_ Ph: (\_\_\_\_) \_\_\_\_\_ Date Certified: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip.: \_\_\_\_\_

Agricultural Products: \_\_\_\_\_

Name: \_\_\_\_\_ Ph: (\_\_\_\_) \_\_\_\_\_ Date Certified: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip.: \_\_\_\_\_

Agricultural Products: \_\_\_\_\_